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REQUEST FOR WITHDRAWAL AS ATTORNEY OR AGENT AND CHANGE OF **CORRESPONDENCE ADDRESS**

Application Number	10/713,905				
Filing Date	August 12, 2002				
First Named Inventor	Sheng (Ted) Tai Tsao				
Art Unit	2145 Adnan M. Mirza				
Examiner Name					
Attorney Docket Number	1049.P0003US				

P.O.	nmissioner fo Box 1450 andria, VA 2								
Pleas	se withdraw me	e as attorney or agent for the abo	ve identifie	d patent	application	ı, and			
	all the attorneys/agents of record.								
the attorneys/agents (with registration numbers) listed on the attached paper(s), or									
	the attorneys/agents associated with Customer Number								
NOTE: This box can only be checked when the power of attorney of record in the application is to all the practitioners associated with a customer number.									
The reaso	The reasons for this request are: Financial reasons								
		CORRESPO	NDENCE	ADD	RESS				
1	he corresponde	ence address is NOT affected by	this withdra	awal.		-			
2. Change the correspondence address and direct all future correspondence to:									
The address associated with Customer Number:									
OR									
✓ Inc	m <i>or</i> dividual Name	Sheng (Ted) Tai Tsao							
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Country		USA							
Telephone (408) 813-0536				Email ted.tsao@sttwebos.com					
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NOTE: Withdrawal is effective when approved rather than when received. Unless there are at least 30 days between approval of withdrawal and the expiration date of a time period for response or possible extension period, the request to withdraw is normally disapproved.									

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